FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005

Estimated average burden hours per response . . . 16.00

SEC USE ONLY							
Prefix Serial							
DAT [E RECEIVED						

Name of Offering (check if this is an amendment and	d name has changed, and indicate change.)	
Aetos Capital Asia T. E., L.P. Limited	Partnership Interests	
Filing Under (Check box(es) that apply): Rule 504	☐ Rule 505 🛮 Rule 506 ☐ Section 40	(6) ULOE PROCESSE
Type of Filing: ☐ New Filing ☒ Amendment	A. BASIC IDENTIFICATION DATA	750 00 2003
Enter the information requested about the issuer	A. BASIC IDENTIFICATION DATA	- J DEC 02 Ams
Name of Issuer (☐ check if this is an amendment and n Aetos Capital Asia T. E., L.P.	ame has changed, and indicate change.)	THOMSON FINANCIAL
Address of Executive Offices	Telephone Number (Including Area Code)	
375 Park Avenue, New York, New York 10152		212-201-2500
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(ii different from Excoutive Offices)	Same as above	Same as above
Brief Description of Business		
Aetos Capital Asia T. E., L.P. will invest in debt, equit	y or other interests in real estate and real estat	e related assets located in Asia.
Type of Business Organization		
☐ corporation	⋈ limited partnership,	already formed
☐ business trust	limited partnership,	to be formed
Jurisdiction of Incorporation or Organization: (Enter two- CN for Ca	letter U.S. Postal Service abbreviation for Statemanda; FN for other foreign jurisdiction) DE	
1. GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securit 15 U.S.C. 77d(6).	ties in reliance on an exemption under Regula	tion D or Section 4(6), 17 CFR 230.501 et seq. or
When to File: A notice must be filed no later than 15 days and Exchange Commission (SEC) on the earlier of the da on which it is due, on the date it was mailed by United S	te it is received by the SEC at the address given	below or, if received at that address after the date
Where to File: U.S. Securities and Exchange Commission	n, 450 Fifth Street, N.W., Washington, D.C. 20	0549.
Copies Required: Five (5) copies of this notice must be fil photocopies of the manually signed copy or bear typed or	ed with the SEC, one of which must be manual printed signatures.	lly signed. Any copies not manually signed must be
Information Required: A new filing must contain all information, the information requested in Part C, and any mat need not be filed with the SEC.	mation requested. Amendments need only repo erial changes from the information previously s	ort the name of the issuer and offering, any changes supplied in Parts A and B. Part E and the Appendix
Filing Fee: There is no federal filing fee.		
State: This notice shall be used to indicate reliance on the Uniff ULOE and that have adopted this form. Issuers relying on to be, or have been made. If a state requires the payment of this form. This notice shall be filed in the appropriate stamust be completed.	ULOE must file a separate notice with the Sec f a fee as a precondition to the claim for the exer tes in accordance with state law. The Appendi	curities Administrator in each state where sales are mption, a fee in the proper amount shall accompany
Failure to file notice in the appropriate states will not result in a loss of exemption unless such exemption is predicated on the filing of a feder	ATTENTION the federal exemption. Conversely, failure to file the approal notice.	priate federal notice will not result in a loss of an available state

 Each beneficial owners of the issuer; 	er having the pow		lirect the vote or disposition		re of a class of equity securities
Each executive officeEach general and ma		=	corporate general and manag	ging partners of	partnership issuers; and
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Aetos Capital, LLC					
Business or Residence Addre 375 Park Avenue, New Yo			Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Aetos Capital Asia GP, L.I					
Business or Residence Addre 375 Park Avenue, New Yo			Code) 		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director)	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Allwin, James M.					
Business or Residence Address 375 Park Avenue, New Yo		d Street, City, State, Zip (Code)		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☑ Executive Officer (of the General Partner	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Kelley, Scott M.					
Business or Residence Addre 375 Park Avenue, New Yo			Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Schaaff, Harold J.					
Business or Residence Address 375 Park Avenue, New Yo			Code)		
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
California State Teachers'	Retirement Syste	m			
Business or Residence Addre 7667 Folsom Boulevard, S			Code)		
			lditional copies of this sheet	, as necessary.)	

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
State of California Public I	Employees' Retire	ement System	·		
Business or Residence Addre Lincoln Plaza, 400 P Street					
Check Box(es) that Apply:	☐ Promoter		☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Bullshead, Limited Liability	•	C.)			
Business or Residence Address 3001 Summer Street, Stamb	•		Code)		
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i United Nations on behalf of		ions Joint Staff Pension F	und		
Business or Residence Addre United Nations, New York	•		Code)		

														Yes	No
1.	Has the	issuer so	ld, or does	the issuer i	ntend to sel er also in A	-				~			,		\boxtimes
2.	What is	the mini	mum inve	stment that	-		•	_						\$ <u>4,000</u>	,000
														Yes	No
3.	Does the	e offering	g permit jo	int ownersh	ip of a sing	le unit?									\boxtimes
	similar r is an ass broker o	emunera ociated p r dealer.	ition for so person or a If more tha	ested for each licitation of gent of a br an five (5) p ker or deale	purchasers oker or dea persons to b	in connecti ler registere	on with sa d with the	les of sec SEC and	urities in t /or with a	he offering state or st	g. If a pers ates, list th	on to be li ie name of	sted the	N/A	<u>-</u> -
Full l	Name (L	ast name	e first, if in	dividual)											
Busin	ness or R	esidence	e Address	Number an	d Street, Ci	ty, State, Z	ip Code)							<u></u>	
Name	e of Asso	ociated F	Broker or D	ealer	<u> </u>	<u> </u>			<u>-</u>	· _					
State	s in Whi	ch Perso	n Listed H	as Solicited	or Intends	to Solicit P	urchasers						_		
(Ch	eck "All	States"	or check ir	ndividual St	ates)						<i></i>			□ Al	l States
(AL [IL] [M] _[RI	[Γ]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY	[ID] [MC [PA [PR])]]	
			e first, if in			<u></u>		k <u>:</u> _=t		<u></u>	<u></u>	- <u>-</u>	L- :-	<u> </u>	
—— Busir	ness or R	Cesidence	e Address	Number an	d Street, Ci	ty, State, Z	ip Code)					···		·- <u></u>	<u></u>
Name	e of Asso	ociated E	Broker or D	ealer											
State	s in Whi	ch Perso	n Listed H	as Solicited	or Intends	to Solicit P	urchasers								
(Ch	eck "All	States"	or check ir	ndividual St	ates)									□ Al	1 States
[AL [IL] [M] [RI	Γ] [AK] [N] NE] SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full l	Name (L	ast name	e first, if in	dividual)											
Busir	ness or R	Cesidence	e Address	(Number ar	d Street, Ci	ity, State, Z	ip Code)								
Name	e of Asso	ociated E	Broker or D)ealer			<u> </u>	· <u> </u>	<u>-</u>					···	
State	s in Whi	ch Perso	n Listed H	as Solicited	or Intends	to Solicit P	urchasers								
(Ch	eck "All	States"	or check ir	ndividual St	ates)										I States
[AI [IL] [M] [RI	 Γ] [[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this		
	box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ <u> </u>	\$ <u> 0 </u>
	Equity	\$0	\$ <u> </u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$0	s 0
	Partnership Interests	\$ 0	\$ 0
	Other (Specify Limited Partnership Interests)	\$ 480,000,000	\$ 480,000,000
	Total	\$ 480,000,000	\$ 480,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Accredited Investors Non-accredited investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE.	Number Investors 18 0 N/A	Aggregate Dollar Amount of Purchases \$_480,000,000 \$_0 \$_N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
		Type of Security	Dollar Amount Sold
	Type of offering	Soouth	Doid
	Rule 505	N/A	\$ <u>N/A</u>
	Regulation A	N/A N/A	\$ <u>N/A</u> \$ N/A
	Total	N/A	\$ N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities offering. Exclude amounts relating solely to organization expenses of the issuer. The information may as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate at the box to the left of the estimate. Transfer Agent's Fees	be given nd check	\$0
	Printing and Engraving Costs	_	\$ 0
	Legal Fees	_	\$ 953,000*
	Accounting Fees	_	\$ 0*
	Engineering Fees	-	Y
		_	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	\$0
	Total	····· 🛮	\$ 953,000*

^{*} These amounts are estimates based on the costs incurred to date and the fact that any offering expenses in excess of the Partnership's pro rata share of the \$1.25 million collective offering expenses cap for the Partnership and two related partnerships will be borne by the General Partner.

1 and total expenses furnished in response t	te offering price given in response to Part C - Coperate C - Question 4.a. This difference is the	adjust	ed			\$_479,047,000
for each of the purposes shown. If the amou and check the box to the left of the estimate	ross proceeds to the issuer used or proposed to nt for any purpose is not known, furnish an est. The total of the payments listed must equal the th in response to Part C - Question 4.b above.	mate	:d			
			D	ayments to Officers, birectors, & Affiliates		Payments To Others
Salaries and fees			\$	0		\$
Purchase of real estate			\$	0		\$0
Purchase, rental or leasing and install	ation of machinery and equipment		\$	0		\$0
Construction or leasing of plant build	ings and facilities		\$	0		\$ <u> </u>
offering that may be used in exchange	ding the value of securities involved in this e for the assets or securities of another issuer		\$	0		\$0
Repayment of indebtedness			\$	0		\$0
Working capital			\$	0		\$0
	t, equity or other interests in real estate and		\$	0	⊠	\$_479,047,000
Column Totals			\$	0	×	\$ <u>479,047,000</u>
Total Payments Listed (column totals	added)		×	\$4	79 <u>,</u> 047,	000
	D. FEDERAL SIGNATURE					
The issuer has duly caused this notice to be signed constitutes an undertaking by the issuer to furnifurnished by the issuer to any non-accredited inv	by the undersigned duly authorized person. If this sh to the U.S. Securities and Exchange Commiss testor pursuant to paragraph (b)(2) of Rule 502.	notice sion, u	is file oon w	d under Rule 5 ritten request	05, the of its st	following signature aff, the information
Issuer (Print or Type)	Signature ///			Date		
Aetos Capital Asia T. E., L.P.	Mall Silver		_	Novemb	er 21,	2003
Name of Signer (Print or Type)	Title of Signer (Print or Type)					
Harold J. Schaaff	Managing Director of ACA Advisors, LLC, L.P., the general partner of the Issuer	the ge	neral	partner of Ae	tos Car	pital Asia GP,
	ATTENTION -					

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS